MAR 0.6 2006

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)					Docket Number (Optional) 544642000100				
Applic	cation Number		Filed	October 1, 2003					
For	MANAGING	MICROPAYMEN	T TRANSACTI	ONS WITH VALUE	ACCOUNTS				
Art Ur	nit 3625	•		•	Examiner	R. E. Rhode			
identif	fied application	·		36(a) to extend the		•			
The re	equested exter	nsion and fee are	as follows (che	ck time period desi <u>Fee</u>	red and enter the a Small Entity Fe	appropriate fee belov <u>ee</u>			
	X One mo	onth (37 CFR 1.17	(a)(1))	\$120	\$60	\$ 60.0			
	Two mo	onths (37 CFR 1.1	7(a)(2))	\$450	\$225	\$			
٠	Three m	nonths (37 CFR 1.	.17(a)(3))	\$1020	\$510	\$			
	Four mo	onths (37 CFR 1.1	7(a)(4))	\$1590	\$795	\$			
	Five mo	nths (37 CFR 1.1	7(a)(5))	\$2160	\$1080	\$			
 x	A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 03-1952 I have enclosed a duplicate copy of this cheet. Fee Transmittel form (PTO/8B/17) is attached to this submission in duplicate.								
l a	m the	applicant/inventassionee of rec		re interest. See 37	CFR 3.71.				
				3.73(b) is enclosed Registration Numbe	-	6). 			
	×	attorney or age	nt under 37 CF	R 1,34,					
				nder 37 CFR 1.34	42,126	•			
MATE NON				Ma	rch 6, 2006				
	Signature				Date (445) and another				
-	Robert E. Scheid Typed or printed name				(415) 268-6369 Telephone Number				
NOT Bar	TE: Signatures of al none signature la re	I the inventors or assign		entire interest or their repn	•	. Submit multiple forms if m			

I hereby certify that this correspondence is being facsi	ertelim	nsmitted to the Pa	stefft and Tra	demark Office	, facsimile no.
(571) 273-8300, on the date shown below.			1. 11	,	

Dated: March 6, 2006

03/08/2006 EFLORES 00000070 031952 60.00 DA

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CENTRAL FAX CENTER

NO. 338 P. 3

MAR 0 6 2006

Underthe Paperwork Re	duction Act of 1995	. no person are required to	U.S. Pater	et and Trades	roved for use throu nan't Office; U.S. Di tion unless it display	EDADTACHT A	E COMMERCE			
	tive on 12/08/2004		respond to a collection of information unless it displays a valid QMS control number Complete if Known							
Fees pursuant to the Consoli	Application Number 10/678,441									
FEE TR	ANSM	ITTAL	Filing Date		October 1, 20	003				
					Dac-Ping BAO					
FO:	r FY 200	<u> </u>			R. E. Rhode					
X Applicant claims sn	red entity status. I	See 37 CFR 1.27	Art Unit 3		3625					
TOTAL AMOUNT OF PA	YMENT .	(\$) 210.00	Attorney Docket No. 5		544642000100					
METHOD OF PAYME	NT (check all t	hat apply)								
Check Credit	Card N	ioney Order No	ne Other	(pleaso ideni	tify):					
X Deposit Account De	sposili Account Numb	er: 03-1952 Deposit Acc	count Name:	Мо	mison & Foers	ster LLP				
For the above-ide	entified deposit s	account, the Director is	hereby authoriz	ed to: (che	ck all that apply	· · · · · · · · · · · · · · · · · · ·				
x Charge fee	(s) indicated bel	ow	Charg	e fee(s) in:	dicated below, e	except for th	e filing fee			
	additional fee(ser 37 CFR 1.16 s	s) or underpayment of	X Credit	any overp	ayments	•	_			
FEE CALCULATION	1 37 C/ K 1.10	siw 1.17								
1. BASIC FILING, SEAR	CH. AND EXAN	INATION FEES	_							
•	FILING	g fees se	ARCH FEES		NATION FEES	3				
Application Type	Fee (\$)	<u>Small Entity</u> <u>Fea (S)</u> Fee (S	<u>Smail Entity</u>) <u>Fee (S)</u>	<u>Fee (\$)</u>	Small Entity Fee (5)	Fees P	ald (\$)			
Utility	300	150 500	250	200	100					
Design	200	100 100	50	130	65					
Plant	200	100 300	150	160	80					
Reissue	300	150 500	250	600	300					
Provisional	200	100 0	0	0	0		· ·			
2. EXCESS CLAIM PEES	}						angil Entity			
Fee Description	4:					<u>Fee (\$)</u>	Foc (5)			
Each claim over 20 (inclu	•					50	25			
Each independent claim (Multiple dependent claim		g Kolssucs)				200	100 180			
		ifi Eas T	Nation (P)		ulfiula Banand	360 ant Claima	190			
Total Claims Extr 30 -24 =	a Claim s F		aid (\$) Multiple Dep 0.00 Fac (\$)			ndent Claims Fee Paid (\$)				
	<u> </u>	<u> </u>	0.00		80 81	0	_			
			Paid (\$)				_			
3. APPLICATION SIZE F		100 =	0		•					
		d 100 sheets of paper	(excluding elect	onically fi	led seguence or	computer				
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50										
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).										
Total Sheets Extra Sheets Number of each additional 60 or fraction thereof Fee (5) Fee Paid (5)										
100 = /50 (round up to a whele number) x = 0										
4. OTHER FEE(S) Non-English Specification. \$130 fee (no small entity discount) 0										
Other (e.g., late filing surcharge): 2251 Extension for response within first month 60.00										
SUBMITTED BY										
Signature	1 / W	6.1	Registration No. (Altorney/Agent)	42,126	Telephone	(415) 268	-6369			
Name (Print/Type) Robert	E. Scheld		Terranch wilder		Conte	March 6.				